

EXHIBIT C

Magazines

5042 Wilshire Blvd, Suite 24866
Los Angeles, CA 90036

Customer Service: (800)259-7323
info@magazineassociation.info



Authorized Dealers

Bill To: GEORGE GERHARZ

MILWAUKEE, WI

Remaining Balance: \$69.99

Payment Method: N/A

Exp Date: N/A

Ending in: N/A

Ship To: GEORGE GERHARZ

MILWAUKEE, WI

Billing Phone:

Order Date: 04/09/2014

Product	Quantity	Total
Atlantic	2Y	\$69.99 (Unpaid)
Payment Due Immediate		
Grand Total:		\$69.99

We have a recorded confirmation of you agreeing to this order Please send in payment withing the next 7 business days to stop further action.

Please sign & return this form to prevent a lapse in service.

Print Name _____

Signature _____

Date _____

Magazines
5042 Wilshire Blvd Suite 24866
Los Angeles, CA 90036
(8 00)2 56 -3 241

ONE TIME CREDIT CARD PAYMENT AUTHORIZATION FORM

Sign and complete this form to authorize Magazines to make a one time debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the information below:

I _____ authorize Magazines to charge my credit card account indicated below for \$ _____ on or after ____/____/____. This payment is for the renewal/purchase of the magazine subscriptions list on the attached invoice.

Billing Address: _____ Phone: _____
_____ Email: _____

Account Type: _____ Visa _____ MasterCard _____ AMEX _____ Discover

Cardholder Name: _____

Account Number: _____

Expiration Date: _____

CVV2: _____

*3 digit number on back of Visa/MC, 4 digits on front of AMEX

If you prefer to have your balance split into easy monthly payments, please check one of the following options. Otherwise the total balance for your order will be processed as one payment. Payment plans are automatically processed on the same day every month as the first payment until all payments are successfully processed.

_____ Please split my order into 3 equal automatic monthly payments

_____ Please split my order into 2 equal automatic monthly payments

Signature: _____ Date: _____

I authorize Magazines to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described on the attached invoice, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.